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PTO/SB/21 (09-04)

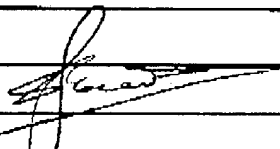
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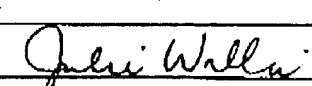
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/613,375
	Filing Date	07-03-2003
	First Named Inventor	Elan Yogeswaran
	Art Unit	2034
	Examiner Name	Mark Osborne Budd
	Attorney Docket Number	PAT027US
Total Number of Pages in This Submission		3

ENCLOSURES <small>(Check all that apply)</small>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Notice of Fee Deficiency
<div style="float: right; text-align: center;"> RECEIVED OIPE/IAP AUG 22 2005 </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name			
Signature			
Printed name	Stuart J. Ford		
Date	August 19, 2005	Reg. No.	37,486

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Julie Wallie	Date	8-19-2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application No. 10/613,375
Response to Notice of Fee Deficiency

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/613,375 Confirmation No. 7193
Applicant : Elan Yogeswaren
Filed : July 3, 2003
TC/A.U. : 2834
Examiner : Mark Osborne Budd
Docket No. : PAT027US
Customer No. : 32656

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF FEE DEFICIENCY

Dear Sir:

On June 1, 2005 Applicant filed a Response to the first office action in the instant case, mailed by the USPTO on March 11, 2005. The Response included claim amendments comprising the cancellation of two claims, the withdrawal of another claim, and the addition of three new claims. A Notice of Fee Deficiency was mailed to the Applicant on June 8, 2005 by the USPTO (the "Notice"). The Notice indicated a fee deficiency of \$250 for excess claims.

The Commissioner of Patents is hereby authorized to charge Deposit Account No. 502255 for the fee deficiency noted in the Notice.

08/22/2005 JBALINAN 00000033 502255 10613375

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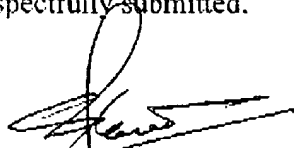
-1-

Application No. 10/613,375
Response to Notice of Fee Deficiency

Respectfully submitted.

Date:

August 19, 2005


Stuart J. Ford
Registry No. 37,486
PathFinder Energy Services, Inc.
15151 Sommermeyer Street
Houston, Texas 77041
(713) 996-1760 Telephone
(713) 996-4164 Facsimile
- Applicant -



UNITED STATES PATENT AND TRADEMARK OFFICE

UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND
DIRECTOR OF THE UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, DC 20230
www.uspto.gov

10/613,325

Paper No.

NOTICE OF FEE DEFICIENCY

The informality regarding the payment of the fee is indicated below in connection with

- ☐ the original filing of the application and/or preliminary amendment (e.g. additional claim fee)
- ☒ the reply filed on 6/1/05. The reply is not fully responsive to the prior Office action because of the following matter(s) See 37 CFR 1.111 and 37 CFR 1.135.

FEE(S) DUE

- ☐ 1. The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance* is due within the time period set below.
- ☐ 2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due to Account _____ (Card type + last 4 digits ONLY) was refused. The balance* is due within the time period set below.
- ☒ 3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the time period set below.
- ☐ 4. The filing fee of \$ _____ submitted in this application is insufficient. A balance of \$ _____ is due for presentation of excess claims (37 CFR 1.16(b) & (c)).
- ☐ 5. Other _____

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

\$ 250 is needed for excess claims.

APPLICANT IS GIVEN A TIME PERIOD OF ONE (1) MONTH or THIRTY (30) DAYS FROM THE MAILING DATE OF THIS NOTICE, WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FEE OF \$ _____ IN ORDER TO AVOID ABANDONMENT. EXTENSIONS OF THIS TIME PERIOD MAY BE GRANTED UNDER 37 CFR 1.136.

THE INDICATED AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE YEARLY ON OCTOBER 1 (37 CFR 1.16 & 1.21). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS NOT NECESSARILY THE FEE INDICATED ABOVE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS POSTED ON THE USPTO'S WEBSITE AT: <http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm>

*Service Charges: There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(n)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

Joy Dowd

Legal Instrument(s) Examiner: LEE or Clerk of Group

Inquires regarding this Notice should be addressed to the above at 571-272-1570 (insert Phone Number).

PTOL-319 (Rev 3-02)

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